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CONFIRMATION NO. 2976

<b>SERIAL NUMBER</b> 10/827,462	<b>FILING OR 371(c) DATE</b> 04/19/2004 <b>RULE</b>	<b>CLASS</b> 375	<b>GROUP ART UNIT</b> 2611	<b>ATTORNEY DOCKET NO.</b> 20040025-CIP
<b>APPLICANTS</b> Diane G. Mills, Wilmington, MA; Geoffrey S. Edelson, Andover, MA; Dianne E. Egnor, Nashua, NH;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/465,026 04/24/2003 and is a CIP of 10/422,340 04/24/2003 PAT 6,954,482 and is a CIP of 10/482,598 04/22/2005 PAT 6,999,498 <i>OK! DH</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>NONE! DH</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/29/2004</b> <i>OK!</i>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 23
Verified and Acknowledged Examiner's Signature <i>DH</i> Initials		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> 42716				
<b>TITLE</b> Multiuser detection aided multiple access differential M-ary coding applications				
<b>FILING FEE RECEIVED</b> 824	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	